| Fill in this information to identify your case: | | |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| EASTERN DISTRICT OF MICHIGAN | _ | |
| Case number (if known) | _ Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|---|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Jacqueline First name | First name |
| | license or passport). | Chartrant Middle name | Middle name |
| | Bring your picture identification to your meeting with the trustee. | Gresehover Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | 3 | |
| | Include your married or maiden names. | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-0336 | |

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| 5. | Where you live | 157 Evergreen Trl | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Oakland County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

| 7. | The chapter of the Bankruptcy Code you are | Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. | | | | | | |
|-----|---|---|--|--|---|---|----------------|--|
| | choosing to file under | Chapter 7 | | | | | | |
| | | ☐ Chap | ter 11 | | | | | |
| | | ☐ Chap | ter 12 | | | | | |
| | | ☐ Chap | ter 13 | | | | | |
| 8. | How you will pay the fee | ab ord | out how y | ou may pay. Typica attorney is submit | ally, if you are paying the fee yo | ck with the clerk's office in your local court for rourself, you may pay with cash, cashier's checalf, your attorney may pay with a credit card o | k, or money | |
| | | | | | Iments. If you choose this opti Official Form 103A). | on, sign and attach the Application for Individu | als to Pay | |
| | | □ Ire bu ap | equest that t is not rec plies to yo | at my fee be waive quired to, waive you ur family size and | ed (You may request this optiour fee, and may do so only if you are unable to pay the fee i | n only if you are filing for Chapter 7. By law, a our income is less than 150% of the official powen installments). If you choose this option, you cial Form 103B) and file it with your petition. | erty line that | |
| 9. | Have you filed for | | | | | | | |
| 9. | bankruptcy within the | ■ No. | | | | | | |
| | last 8 years? | ☐ Yes. | District | | \\/han | Coop number | | |
| | | | District District | | When When | Casa number | | |
| | | | District | | When | Case number Case number | | |
| | | | District | | Wildin | Oddo Hambol | | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes. | | | | | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| | | | Debtor | | | Relationship to you | | |
| | | | District | | When | Case number, if known | | |
| 11. | Do you rent your residence? | □ No. | Go to | line 12. | | | | |
| | residence : | Yes. | Has y | our landlord obtain | ed an eviction judgment agains | st you? | | |
| | | | | No. Go to line 12 | | | | |
| | | | | Yes. Fill out <i>Initia</i> bankruptcy petition | | Judgment Against You (Form 101A) and file it | with this | |

Case number (if known)

Debtor 1 Jacqueline Chartrant Gresehover

| - | Jacqueille Charti | ant Ores | CHOVE | | Case Hamber (i wiowi) |
|-----|---|--------------------|------------------|---------------------------------------|--|
| | Daniel Aleest Assa Bu | | V | and Oaks Duranis | |
| arı | Report About Any Bu | isinesses | You Own | as a Sole Proprie | tor |
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of bus | siness |
| | A sole proprietorship is a | | | | |
| | business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | | of business, if any | 44 9 7ID Code |
| | If you have more than one sole proprietorship, use a separate sheet and attach | | Numb | er, Street, City, Sta | te & ZIP Code |
| | it to this petition. | | Check | k the appropriate bo | ox to describe your business: |
| | | | | Health Care Busin | ness (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as d | lefined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broke | er (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | e |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadline operation | s. If you in | dicate that you are ow statement, and | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am n | ot filing under Chap | oter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am fi | iling under Chapter | 11 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| | | | | | |
| | | Have Any | / Hazardo | ous Property or An | y Property That Needs Immediate Attention |
| 14. | Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to | ■ No. | What is t | the hazard? | |
| | public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | |
| | - • | | | | Number, Street, City, State & Zip Code |
| | | | | | |
| | | | | | |
| | | | | | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Answer These Questions for Reporting Purposes | Deb | tor 1 Jacqueline Chartr | ant Grese | nover | Case | e number (if known) | |
|--|------|-------------------------|-------------------------|---|--|--|-----------------------|
| No. Go to line 16b. Yes, Go to line 17. | Part | 6: Answer These Quest | ons for Re | oorting Purposes | | | |
| Yes, Go to line 17. | 16. | | i | ndividual primarily for a per | | | 8) as "incurred by an |
| 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | → No. Go to line 16b. | | | |
| money for a business or investment or through the operation of the business or investment. No. Go to line 16c. State the type of debts you owe that are not consumer debts or business debts | | | | Yes. Go to line 17. | | | |
| To compare the c | | | | | | | ain |
| 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filling under Chapter 7. Go to line 18. | | | 1 | ☐ No. Go to line 16c. | | | |
| 17. Are you filing under Chapter 7. Go to line 18. Are you estimate that after any exempt property is excluded and administrative expensate paid that funds will be available to distribute to unsacured creditors? Yes. Iam filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expensate paid that funds will be available for distribution to unsecured creditors? No | | | | | | | |
| Temperature | | | 16c. | State the type of debts you | owe that are not consumer debts or | business debts | |
| after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to late your labilities to be? 10. How much do you assets to late your labilities to be? 11. How much do you assets to late your assets to late your labilities to be? 12. How much do you assets to late your labilities late your labilities late your labilities late your labilities to late your labilities late your labi | 17. | | □ No. | am not filing under Chapte | er 7. Go to line 18. | | |
| administrative expenses are paid that funds will be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you owe? 19. How much do you estimate your John that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your labilities of the worth? 19. So - \$50,000 | | after any exempt | ■ Yes. | am filing under Chapter 7. are paid that funds will be a | Do you estimate that after any exervailable to distribute to unsecured c | mpt property is excluded and addereditors? | ministrative expenses |
| be available for distribution to unsecured creditors? 18. How many Creditors do you estimate that you owe? 19. How much do you estimate that you over? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your liabilities to be? 19. Stop,0001 - \$100,000 | | administrative expenses | | No | | | |
| 18. How many Creditors do you estimate that you owe? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your assets to be worth? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. How much do you estimate your liabilities to be? 19. 0. S50,000 | | | I | ☐Yes | | | |
| you estimate that you owe? 50.99 | | | | | | | |
| you estimate that you owe? 50.99 | 18. | How many Creditors do | 1-49 | | □ 1.000-5.000 | □ 25.001-50.000 | |
| 100-199 | | | | | | | |
| 19. How much do you estimate your assets to be worth? \$0 - \$50,000 | | owe : | □ 100-199 |) | 1 0,001-25,000 | ☐ More than 100, | 000 |
| estimate your assets to be worth? \$50,001 - \$100,000 | | | 200-999 | 9 | | | |
| be worth? \$50,001 - \$100,0001 \$50,0001 - \$100,0000 \$50,0000,001 - \$100 million \$10,000,000,001 - \$500 billion \$10,000,000,001 - \$500 million \$10,000,000,001 - \$500 million \$10,000,000,001 - \$500 million \$500,000,001 - \$100 billion \$10,000,000,001 - \$100 billion \$10,000,000,001 - \$100 billion \$100,000,001 - \$100 million \$10,000,000,001 - \$100 billion \$100,000,001 - \$100 million \$100,000,001 - \$1 | 19. | | \$0 - \$50 | 0,000 | ☐ \$1,000,001 - \$10 million | \$500,000,001 | - \$1 billion |
| \$500,001 - \$1 million \$100,000,001 - \$500 million More than \$50 billion | | | □ \$50,00° | - \$100,000 | | | |
| 20. How much do you estimate your liabilities to be? \$50,000 | | | | | | | |
| estimate your liabilities to be? \$50,001 - \$100,000 | | | □ \$500,00 |)1 - \$1 million | — \$100,000,001 - \$500 IIII | | Dillion |
| The be? \$100,001 - \$100,000 | 20. | | □ \$0 - \$50 | 0,000 | | | |
| Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Is/ Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | | | | | | | |
| For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Is/Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | | | | | _ ` ' ' ' ` | _ ` ` ` ` ` | • |
| I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Is Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | | | \$500,00 | 71 - \$1 million | — \$100,000,001 \$000 1111 | | , billion |
| If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Is/ Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | Part | 7: Sign Below | | | | | |
| United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Is/ Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | For | you | I have exa | mined this petition, and I de | clare under penalty of perjury that t | he information provided is true a | and correct. |
| document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. Isl Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 2 | | | | | | | |
| I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. /s/ Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 1 | | | | | | | fill out this |
| bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 15 and 3571. /s/ Jacqueline Chartrant Gresehover Jacqueline Chartrant Gresehover Signature of Debtor 1 Signature of Debtor 2 | | | I request re | elief in accordance with the | chapter of title 11, United States Co | ode, specified in this petition. | |
| Jacqueline Chartrant Gresehover Signature of Debtor 1 Signature of Debtor 2 | | | bankruptcy and 3571. | case can result in fines up | to \$250,000, or imprisonment for u | | |
| Signature of Debtor 1 | | | | | | of Debtor 2 | |
| | | | | | C. C.g. atalo | | |
| Executed on December 12, 2018 Executed on | | | Executed of | on December 12, 2018 | Executed of | on | |
| MM / DD / YYYY | | | | | | MM / DD / YYYY | |

| Debtor 1 | Jacqueline Chartrant Gresehover | Case number (if known) | |
|----------|---------------------------------|------------------------|--|
| | | | |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| | nie Krane-Boehmer | Date | December 12, 2018 | |
|-----------------|----------------------------|---------------|---------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| Stephanie | Krane-Boehmer P70737 | | | |
| Printed name | | | | |
| Law Office | e of Stephanie Krane-Boehm | er, PLLC | | |
| Firm name | | | | |
| 2947 S. Ad | lams Rd. | | | |
| Rochester | Hills, MI 48309 | | | |
| Number, Street, | City, State & ZIP Code | | | |
| Contact phone | 248-293-0048 | Email address | s_krane@hotmail.com | |
| P70737 M | | | | |
| Bar number & S | tate | | | |

Certificate Number: 01401-MIE-CC-032012291



CERTIFICATE OF COUNSELING

I CERTIFY that on <u>December 10, 2018</u>, at <u>11:35</u> o'clock <u>AM EST</u>, <u>Jacqueline Gresehover</u> received from <u>GreenPath</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. § 111 to provide credit counseling in the <u>Eastern District of Michigan</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. §§ 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: December 10, 2018

By: /s/Jeremy Lark for Vickey Williams

Name: Vickey Williams

Title:

Counselor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

| Fill | in this information to identify y | our case: | | | |
|-------------|---|--|--|--------------|-------------------------------|
| | tor 1 Jacqueline Cl | hartrant Gresehover | | | |
| Deb | First Name tor 2 | Middle Name | Last Name | | |
| | ise if, filing) First Name | Middle Name | Last Name | | |
| Uni | ed States Bankruptcy Court for the | ne: EASTERN DISTRICT C | PF MICHIGAN | | |
| | | | | - 0 | |
| (if kn | wn) | | | | cif this is an ded filing |
| | | | · | | |
| Of | icial Form 106Sum | 1 | | | |
| | | | nd Certain Statistical Information | | 12/15 |
| info you | mation. Fill out all of your sche original forms, you must fill or | edules first; then complete th | e are filing together, both are equally responsible for the information on this form. If you are filing amend the box at the top of this page. | | |
| Par | Summarize Your Assets | | | | |
| | | | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Offici | ial Form 106A/B) | | \$ | 0.00 |
| | | | | Ψ | |
| | | | | \$ | 14,676.10 |
| | 1c. Copy line 63, Total of all pro | perty on Schedule A/B | | \$ | 14,676.10 |
| Par | 2: Summarize Your Liabiliti | es | | | |
| | | | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have 2a. Copy the total you listed in C | | (Official Form 106D) the bottom of the last page of Part 1 of Schedule D | \$ | 0.00 |
| 3. | Schedule E/F: Creditors Who H 3a. Copy the total claims from I | lave Unsecured Claims (Officia Part 1 (priority unsecured claim | I Form 106E/F) as) from line 6e of <i>Schedule E/F</i> | \$ | 0.00 |
| | 3b. Copy the total claims from I | Part 2 (nonpriority unsecured c | laims) from line 6j of Schedule E/F | \$ | 74,657.65 |
| | | | Your total liabilities | \$ | 74,657.65 |
| Par | 3: Summarize Your Income | and Expenses | | | |
| 4. | Schedule I: Your Income (Official Copy your combined monthly in | , |) I | \$ | 3,319.62 |
| 5. | Schedule J: Your Expenses (Of Copy your monthly expenses from | | | \$ | 3,305.00 |
| Par | 4: Answer These Questions | s for Administrative and Stati | stical Records | | |
| 6. | Are you filing for bankruptcy ☐ No. You have nothing to re | • | heck this box and submit this form to the court with yo | ur other sch | nedules. |
| 7. | ■ Yes What kind of debt do you hav | e? | | | |
| | | | debts are those "incurred by an individual primarily for | a personal, | family, or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

3,092.80

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| From Part 4 on Schedule E/F, copy the following: | Total cl | aim |
|--|----------|-----------|
| From Fart 4 on Schedule E/F, copy the following. | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 47,667.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 47,667.00 |

| | | ation to identify your cas | | | | |
|-------------------|--|---|--|---|--|--|
| Debto | or 1 | Jacqueline Chartran | nt Gresehover Middle Name | Last Name | | |
| Debto | or 2 e, if filing) | First Name | Middle Name | Last Name | | |
| | | | | | | |
| Unite | d States Ban | kruptcy Court for the: EA | ASTERN DISTRICT OF | MICHIGAN | | |
| Case | number | | | | | ☐ Check if this is an |
| | | | | | | amended filing |
| ~ · · · | | 400 A /D | | | | |
| _ | | m 106A/B | | | | |
| Scl | nedule | e A/B: Prope | rty | | | 12/15 |
| hink it nform | fits best. Be | as complete and accurate a space is needed, attach a se | s possible. If two married | nce. If an asset fits in more than o d people are filing together, both a n. On the top of any additional pag | are equally responsible for su | ipplying correct |
| Part 1 | Describe E | Each Residence, Building, La | and, or Other Real Estate | You Own or Have an Interest In | | |
| . Do | ou own or ha | ave any legal or equitable int | terest in any residence, b | ouilding, land, or similar property? | | |
| I | lo. Go to Part | 2. | | | | |
| _ | es. Where is | | | | | |
| | | | | | | |
| Part 2 | Describe Y | our Vehicles | | | | |
| 3. Ca | rs, vans, tru | cks, tractors, sport utility | y vehicles, motorcycle | le G: Executory Contracts and Uss | niexpired Leases. | |
| 3. C ai | No | cks, tractors, sport utility | y vehicles, motorcycle | · | похряси Louses. | |
| □ 1 ■ \ | √es | | • | s | Do not deduct secured cl | aims or exemptions. Put |
| | No /es Make: C | hrysler | Who has an intere | · | | ed claims on Schedule D: |
| □ 1 ■ \ | No /es Make: C Model: S | | • | s | Do not deduct secured cl the amount of any secure Creditors Who Have Clai | ed claims on Schedule D: ims Secured by Property. |
| □ 1 ■ \ | Make: C Model: S Year: 2 Approximate | Chrysler Sebring 003 mileage: 162000 | Who has an intere □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D | est in the property? Check one ebtor 2 only | Do not deduct secured cl | ed claims on Schedule D: |
| □ 1 ■ \ | Make: C Model: S Year: 2 | Chrysler Sebring 003 mileage: 162000 | Who has an intere □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D | est in the property? Check one | Do not deduct secured cl the amount of any secure Creditors Who Have Clair | ed claims on Schedule D: ims Secured by Property. Current value of the |
| □ 1 ■ <i>'</i> | Make: C Model: S Year: 2 Approximate | Chrysler Sebring 003 mileage: 162000 | Who has an intere □ Debtor 1 only □ Debtor 2 only □ Debtor 1 and D □ At least one of t | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured cl the amount of any secure Creditors Who Have Clair | ed claims on Schedule D: ims Secured by Property. Current value of the |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informs | Chrysler Sebring 003 mileage: 162000 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 a | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured cl the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 |
| □ 1 ■ \ | Make: C Model: S Year: 2 Approximate Other informate | Chrysler Sebring 003 mileage: 162000 ation: | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Debtor 1 a | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured class the amount of any secure Creditors Who Have Class Current value of the entire property? | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 daims or exemptions. Put ed claims on Schedule D: |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informs Make: H Model: A | Chrysler Sebring 003 mileage: 162000 ation: Ionda accord 009 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is (see instructions) Who has an intered Debtor 1 only Debtor 2 only | est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 daims or exemptions. Put ed claims on Schedule D: |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informate Make: H Model: A Year: 2 Approximate | Chrysler Gebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobto | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair | ced claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 claims or exemptions. Put ed claims on Schedule D: ims Secured by Property. |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informs Make: H Model: A Year: 2 | Chrysler Gebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 only Dobtor 1 and Dobto | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 eaims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informate Make: H Model: A Year: 2 Approximate | Chrysler Gebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 and Dobtor 2 only At least one of the Debtor 1 only Debtor 1 only Debtor 2 only At least one of the Debtor 1 and Dobtor 1 only Debtor 1 and Dobtor 1 and Dobt | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the | ed claims on Schedule D: ims Secured by Property. Current value of the portion you own? \$650.00 eaims or exemptions. Put ed claims on Schedule D: ims Secured by Property. Current value of the |
| 3.1 | Make: C Model: S Year: 2 Approximate Other informate Make: H Model: A Year: 2 Approximate | Chrysler Gebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and Dobtor 1 and Dobtor 2 only At least one of the Debtor 1 only Debtor 1 only Debtor 2 only At least one of the Debtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 1 and Dobtor 2 only At least one of the Debtor 1 only Debtor 1 and Dobtor 1 | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? | cut claims on Schedule Dims Secured by Property Current value of the portion you own? \$650. Current value of the portion own? Current value of the portions. Put and claims on Schedule Dims Secured by Property Current value of the portion you own? |
| 3.1 3.2 | Make: C Model: S Year: 2 Approximate Other informs Make: H Model: A Year: 2 Approximate Other informs | Chrysler Sebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 ation: | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is (see instructions) Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is (see instructions) | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another s community property al vehicles, other vehicles, an | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$4,174.00 | current value of the portion you own? \$650.0 current value of the portion you own? \$650.0 current value of the portion you own? |
| 3.1 3.2 | Make: C Model: S Year: 2 Approximate Other informs Make: H Model: A Year: 2 Approximate Other informs | Chrysler Sebring 003 mileage: 162000 ation: Ionda Accord 009 mileage: 118000 ation: | Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is (see instructions) Who has an intered Debtor 1 only Debtor 2 only Debtor 1 and D At least one of the Check if this is (see instructions) | est in the property? Check one ebtor 2 only the debtors and another s community property est in the property? Check one ebtor 2 only the debtors and another s community property | Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$650.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$4,174.00 | current value of the portion you own? \$650.00 current value of the portion you own? \$650.00 current value of the portion you own? |

Official Form 106A/B Schedule A/B: Property page 1

| Debtor 1 | Jacqueline Chartrant Gresehover Case number (if known) | |
|---|---|--|
| | he dollar value of the portion you own for all of your entries from Part 2, including any entries for syou have attached for Part 2. Write that number here=> | \$4,824.00 |
| | | |
| | Describe Your Personal and Household Items | |
| Do you | own or have any legal or equitable interest in any of the following items? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| <i>Exan</i> □ No | chold goods and furnishings ples: Major appliances, furniture, linens, china, kitchenware s. Describe | |
| ■ Ye | S. Describe | |
| | Household goods and furnishings | \$5,000.00 |
| □ No | polics ples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music of including cell phones, cameras, media players, games s. Describe | ollections; electronic devices |
| | laptop | \$250.00 |
| | ιαριορ | Ψ230:00 |
| Exam ■ No □ Ye | tibles of value ples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin other collections, memorabilia, collectibles Describe ment for sports and hobbies | , or baseball card collections; |
| Exam | ples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes musical instruments bescribe | and kayaks; carpentry tools; |
| 10. Fire a | | |
| | mples: Pistols, rifles, shotguns, ammunition, and related equipment | |
| | s. Describe | |
| 11. Clot l <i>Exa</i> □ No | nes nples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | |
| ■ Ye | s. Describe | |
| | Clothing | \$500.00 |
| | | |
| □ No | mples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, g | gold, silver |
| | Costume jewelry | \$40.00 |
| | oostume jewen y | Ψ70.00 |
| - | farm animals mples: Dogs, cats, birds, horses | |

☐ Yes. Describe.....

Official Form 106A/B Schedule A/B: Property page 2

| | Jacqueline Chartrant Gresehover | Case number (if known) | |
|-----|---|---|--|
| 14. | Any other personal and household items you o ■ No | did not already list, including any health aids you did not list | |
| | ☐ Yes. Give specific information | | |
| 15 | 5. Add the dollar value of all of your entries from for Part 3. Write that number here | m Part 3, including any entries for pages you have attached | \$5,790.00 |
| Pa | art 4: Describe Your Financial Assets | | |
| Do | o you own or have any legal or equitable interes | t in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Examples: Money you have in your wallet, in your □ No ■ Yes | r home, in a safe deposit box, and on hand when you file your petition | on |
| | | Cash | \$10.00 |
| | | Institution name: Chase Bank xx6071 | \$100.10 |
| | 17.2. | with landlord Ronald Ulicini | \$700.00 |
| 18. | Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with No Yes | brokerage firms, money market accounts | |
| 19. | Non-publicly traded stock and interests in incojoint venture No | orporated and unincorporated businesses, including an interes | t in an LLC, partnership, and |
| | Yes. Give specific information about them Name of entity: | | |
| 20. | | egotiable and non-negotiable instruments cashiers' checks, promissory notes, and money orders. t transfer to someone by signing or delivering them. | |
| | ☐ Yes. Give specific information about them | | |
| | Issuer name: | | |
| 21. | Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k | κ), 403(b), thrift savings accounts, or other pension or profit-sharing | plans |
| 21. | Issuer name: Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(kg) | k), 403(b), thrift savings accounts, or other pension or profit-sharing Institution name: | plans |
| | Issuer name: Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k No Yes. List each account separately. Type of account: Security deposits and prepayments Your share of all unused deposits you have made | | |

Official Form 106A/B

page 3

Schedule A/B: Property

| D(| Jacqueille C | Sharifalli Grese | HOVEI | | asc number (# known) | | | |
|-----|---|--|---|-------------------------|------------------------------|---|--|--|
| 22 | Appriition (A contract for | or a pariadia naum | ant of manay to you gith as for life | a ar far a number of s | (0.070) | | | |
| | No | or a periodic paym | ent of money to you, either for lif | e or for a number of y | /ears) | | | |
| | | suer name and de | scription. | | | | | |
| 24. | Interests in an education 26 U.S.C. §§ 530(b)(1), | | ount in a qualified ABLE progr b)(1). | am, or under a qual | ified state tuition progra | m. | | |
| | ■ No | | | | | | | |
| | Yes In | stitution name and | description. Separately file the | records of any interes | sts.11 U.S.C. § 521(c): | | | |
| | Trusts, equitable or fu | ture interests in p | property (other than anything I | isted in line 1), and | rights or powers exercis | sable for your benefit | | |
| | ☐ Yes. Give specific inf | ormation about the | em | | | | | |
| | | nain names, websi | secrets, and other intellectual tes, proceeds from royalties and em | | s | | | |
| | 7. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them | | | | | | | |
| М | oney or property owed t | to you? | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | | |
| | Tax refunds owed to y ☐ No ■ Yes. Give specific info | | m, including whether you alread | y filed the returns and | d the tax years | | | |
| | | | anticipated 2018 tax refund | d | state and federal | \$3,252.00 | | |
| | Family support Examples: Past due or ■ No □ Yes. Give specific info | | r, spousal support, child support, | maintenance, divorc | e settlement, property set | tlement | | |
| | benefits; un | es, disability insura paid loans you ma | ance payments, disability benefit de to someone else | ts, sick pay, vacation | pay, workers' compensat | ion, Social Security | | |
| | ☐ Yes. Give specific inf | ormation | | | | | | |
| | _ | | nce; health savings account (HS | SA); credit, homeowne | er's, or renter's insurance | | | |
| | ■ No | inco compony of a | ach policy and list its value. | | | | | |
| | ☐ Yes. Name the Insura | Company or e | | Beneficiary | <i>/</i> : | Surrender or refund value: | | |
| | Any interest in propert If you are the beneficial someone has died. No | ry of a living trust, | from someone who has died expect proceeds from a life insu | rance policy, or are c | urrently entitled to receive | property because | | |

Official Form 106A/B Schedule A/B: Property page 4

| Deb | or 1 Jacqueline Chartrant Gresehover | | Case number (if known) | |
|--------------|---|-----------------------------|-----------------------------------|-------------|
| _ | Claims against third parties, whether or not you have filed a law Examples: Accidents, employment disputes, insurance claims, or r No | | and for payment | |
| | Yes. Describe each claim | | | |
| | Other contingent and unliquidated claims of every nature, incluing | uding counterclaims | of the debtor and rights to set o | ff claims |
| | Yes. Describe each claim | | | |
| _ | ny financial assets you did not already list No | | | |
| | Yes. Give specific information | | | |
| 36. | Add the dollar value of all of your entries from Part 4, includir for Part 4. Write that number here | | | \$4,062.10 |
| Part | Describe Any Business-Related Property You Own or Have an Inte | rest In. List any real esta | ate in Part 1. | |
| 37. C | o you own or have any legal or equitable interest in any business-relat | ed property? | | |
| • | No. Go to Part 6. | | | |
| | Yes. Go to line 38. | | | |
| Part | 6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1. | ı Own or Have an Interes | st In. | |
| 46. I | o you own or have any legal or equitable interest in any farm- | or commercial fishin | g-related property? | |
| | No. Go to Part 7. | | | |
| | ☐ Yes. Go to line 47. | | | |
| Part | 7: Describe All Property You Own or Have an Interest in That Yo | u Did Not List Above | | |
| | | | | |
| 53. I | Oo you have other property of any kind you did not already list Examples: Season tickets, country club membership | ? | | |
| | No | | | |
| | Yes. Give specific information | | | |
| 54 | Add the dollar value of all of your entries from Part 7. Write th | ast number here | | ¢0.00 |
| 54. | Add the donar value of all of your entries from Fart 7. Write th | iat number nere | | \$0.00 |
| Part | List the Totals of Each Part of this Form | | | |
| 55. | Part 1: Total real estate, line 2 | | | \$0.00 |
| 56. | Part 2: Total vehicles, line 5 | \$4,824.00 | _ | |
| 57. | Part 3: Total personal and household items, line 15 | \$5,790.00 | | |
| 58. | Part 4: Total financial assets, line 36 | \$4,062.10 | | |
| 59. | Part 5: Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7: Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total personal property. Add lines 56 through 61 | \$14,676.10 | Copy personal property total | \$14,676.10 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | | | \$14,676.10 |
| | | | <u> </u> | |

Official Form 106A/B Schedule A/B: Property page 5

| Debtor 1 | Jacqueline Ch | artrant Gresehover | | |
|---------------------------|---------------|--------------------|-----------|-----------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| Case number | | | | |
| Case number (if known) | | | | ☐ Check if this is an |

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. | | | | | | | | |
|----|--|--------------------------------------|--------|---|------------------------------------|--|--|--|--|
| | ☐ You are claiming state and federal nonbar | nkruptcy exemptions. | 11 U.S | S.C. § 522(b)(3) | | | | | |
| | ■ You are claiming federal exemptions. 11 | U.S.C. § 522(b)(2) | | | | | | | |
| 2. | For any property you list on Schedule A/B that you claim as exempt, fill in the information below. | | | | | | | | |
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Am | ount of the exemption you claim | Specific laws that allow exemption | | | | |
| | | Copy the value from Schedule A/B | Che | ck only one box for each exemption. | | | | | |
| | 2003 Chrysler Sebring 162000 miles Line from Schedule A/B: 3.1 | \$650.00 | | \$650.00 | 11 U.S.C. § 522(d)(2) | | | | |
| | Line from Scriedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | 2009 Honda Accord 118000 miles Line from Schedule A/B: 3.2 | \$4,174.00 | | \$4,174.00 | 11 U.S.C. § 522(d)(5) | | | | |
| | Ellie Holli ossiodale 702. GIZ | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Household goods and furnishings Line from Schedule A/B: 6.1 | \$5,000.00 | | \$5,000.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line from Scriedule A/B: 0.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | laptop Line from Schedule A/B: 7.1 | \$250.00 | | \$250.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Irom Schedule A/B. 1.1 | | | 100% of fair market value, up to any applicable statutory limit | | | | | |
| | Clothing Line from Schedule A/B: 11.1 | \$500.00 | | \$500.00 | 11 U.S.C. § 522(d)(3) | | | | |
| | Line Irom Schedule A/B: 11.1 | | | 100% of fair market value, up to | | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

any applicable statutory limit

page 1 of 2

| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amount of the exemption you claim | | Specific laws that allow exemption | |
|----|--|--------------------------------------|-----------------------------------|---|------------------------------------|--|
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | | |
| | Costume jewelry Line from Schedule A/B: 12.1 | \$40.00 | | \$40.00 | 11 U.S.C. § 522(d)(4) | |
| | Elle Helli Sonedale 702. TETT | | | 100% of fair market value, up to any applicable statutory limit | | |
| | Cash Line from Schedule A/B: 16.1 | \$10.00 | | \$10.00 | 11 U.S.C. § 522(d)(5) | |
| | Line Holli Schedule AVB. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | checking: Chase Bank | \$100.10 | | \$100.10 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 17.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | with landlord Ronald Ulicini Line from Schedule A/B: 17.2 | \$700.00 | | \$700.00 | 11 U.S.C. § 522(d)(5) | |
| | Ellie IIIIII Schedule AV.B. 11-2 | | | 100% of fair market value, up to any applicable statutory limit | | |
| | state and federal: anticipated 2018 tax refund | \$3,252.00 | | \$3,252.00 | 11 U.S.C. § 522(d)(5) | |
| | Line from Schedule A/B: 28.1 | | | 100% of fair market value, up to any applicable statutory limit | | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every to No | | | led on or after the date of adjustme | nt.) | |
| | ☐ Yes. Did you acquire the property covere | ed by the exemption wi | thin 1 | ,215 days before you filed this case | ? | |
| | ☐ Yes | | | | | |
| | | | | | | |

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|--------------------|------------|------------------------------------|
| Debtor 1 | | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F MICHIGAN | |
| Case number | | | | Charlettite is as |
| (II KNOWN) | | | | Check if this is an amended filing |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - \square Yes. Fill in all of the information below.

| Fill i | n this inforn | nation to identify your | case: | | | | |
|-----------------|-------------------------------|---|--|---------------------------|--|------------------------|----------------------------------|
| Debt | or 1 | Jacqueline Chartı | rant Gresehover | | | | |
| | | First Name | Middle Name | Last Name | | - | |
| Debt (Spous | or 2 se if, filing) | First Name | Middle Name | Last Name | | - | |
| | | nkruptcy Court for the: | EASTERN DISTRICT | | | | |
| Office | d Olaics Da | intruptey Court for the. | ENOTERIN DIOTRIOT | 01 1/11/07/114 | | _ | |
| | number _ | | | | | | |
| (if kno | wn) | | | | | _ | heck if this is an mended filing |
| | | | | | | | mondod ming |
| | | <u>n 106E/F</u> | | | | | |
| 3ch | edule E | :/F: Creditors W | ho Have Unsec | ured Claims | | | 12/15 |
| eft. A | ttach the Con and case nur | ors Who Have Claims Sec ntinuation Page to this pag mber (if known). II of Your PRIORITY Un | e. If you have no informati | | | | |
| | | ors have priority unsecure | | | | | |
| | No. Go to P | Part 2. | | | | | |
| | ☐ Yes. | | | | | | |
| Part | 2: List A | II of Your NONPRIORIT | Y Unsecured Claims | | | | |
| 4. L u th | Yes. | ve nothing to report in this p r nonpriority unsecured clam, list the creditor separately or holds a particular claim, li | aims in the alphabetical or / for each claim. For each cl | der of the creditor who | o holds each claim. If a c type of claim it is. Do not li | ist claims already inc | luded in Part 1. If more |
| | | | | | | | Total claim |
| 4.1 | Ally Fin | ancial | Last 4 digi | ts of account number | 7213 | | \$3,815.12 |
| | c/o Rad | y Creditor's Name lius Global Solutions egency Square Blvd, | | the debt incurred? | | | |
| | | nville, FL 32225 | | ate you file, the claim | in Obrah allahat arah | | |
| | | treet City State Zlp Code rred the debt? Check one. | As of the d | ate you file, the claim | is: Check all that apply | | |
| | ■ Debtor | | ☐ Conting | ent | | | |
| | ☐ Debtor | • • | ☐ Unliquid | | | | |
| | | 1 and Debtor 2 only | ☐ Dispute | | | | |
| | | st one of the debtors and and | | ONPRIORITY unsecure | d claim: | | |
| | | if this claim is for a comr | Па | loans | | | |
| | debt | im subject to offset? | ☐ Obligati | ons arising out of a sepa | aration agreement or divor | ce that you did not | |
| | No | Sabjeet to onset: | | , | ng plans, and other similar | debts | |
| | ☐ Yes | | | Specify repossessi | | | |
| | — 100 | | ■ Umer S | DECILO DE COCCOST | | | |

| Bankcard Services Normonopy Creditors Name PO Box 48/93 Services Se | Debtor | Jacqueline Chartrant Gresehover | Case number (if known) | |
|--|--------|---|---|------------|
| PO Box 84059 Columbus, GA 31908 Number Street City, State Zip Code Who Incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 1 only Confingent Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 2 only Confingent Confingent Confingent Confingent Confine Check if this claim is for a community debt Is the claim subject to offset? Non Confingent Confine Check if this claim is for a community Confine Check if this claim is for a community Confine Check if this claim is Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 ond Debtor 2 only Debtor 4 ond Debtor 2 only Debtor 4 ond Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 3 ond Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 3 only Check one. Debtor 4 only Check if this claim is for a community debt Is the Capital One Confingent Debtor 1 only Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 3 only Check one. Debtor 4 only Check if this claim is for a community debt Is the claim subject to offset? Non Debtor 3 only Check one. Debtor 4 only Check one. Debtor 5 only Check one. Debtor 5 only Check one. Debtor 6 only Check one. Debtor 1 only Check one. Debtor 1 only Check one. Debtor 2 only Check one. Debtor 3 only Check one. Debtor 4 only Check one. Debtor 5 only Check one. Debtor 1 only Check one. Debtor 1 only Check one. Debtor 1 only Check one. Debtor 2 only Check one. Debtor 1 only Check one. Debtor 1 only Check one. Debtor 2 only Check one. Debtor 3 only Check one. Debtor 4 only Check one. Debtor 5 one Check one. Debtor 6 one Check one. Debtor 7 one Check one. Debtor 1 only Check one. Debtor 1 only Check one. Debtor 2 only Check one. Debtor 3 one Check one. Debtor 4 one Check one. Debtor 5 one Check one. Debtor 5 o | 4.2 | | Last 4 digits of account number 5687 | \$759.07 |
| Number Street City State Zip Code Who Incurred the debt? Check one. Debtor 1 only | | PO Box 84059 | When was the debt incurred? | |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 and Debtor 2 only Disputed Dispute | | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 and Debtor 2 only Disputed Disputed Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 3 only not 2 only D | | _ | ☐ Contingent | |
| Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Student | | | | |
| At least one of the debtors and another Check if this claim is for a community debt C | | _ | · | |
| Check if this claim is for a community debt is the claim subject to offset? | | · | • | |
| debt Is the claim subject to offset? In No In No In No In No In No In Debts to pension or profit-sharing plans, and other similar debts In Other. Specify Credit card purchases 4.3 Beaumont Health Nonpriority Creditor's Name Co Allied Business Services PO Box 1799 Holland, MI 49422 Number Street City State Zip Code Who incurred the debt? Check one. In Debtor 1 only In Debtor 2 only In Debtor 2 only In No In Street City State Zip Code In Street In Street City State Zip Code In State In Street City State Zip Code In Debtor 1 only In Debtor 2 only In Debtor 1 only In In State City State Zip Code In State In | | | ☐ Student loans | |
| Yes Beaumont Health | | debt | | |
| Beaumont Health Nonpriority Creditor's Name C/O Allied Business Services PO Box 1799 Holland, MI 49422 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 sharing plans, and other similar debts Debtor 1 sharing plans, and other similar debts S6,937.81 | | ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Nonpriority Creditor's Name Po Box 1799 Holland, MI 49422 Number 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 sis the claim is for a community debt Nonpriority Creditor's Name Po Box 6492 Carol Stream, IL 60197 Number Streat City State Zip Code Who incurred the debt? Check one. Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only Disputed Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 only Debtor 1 onloy Debtor 2 only Disputed Debtor 1 onloy Debtor 3 onloy Disputed Debtor 1 onloy Debtor 4 and Debtor 3 onloy Disputed Type of NONPRIORITY unsecured claim: Student loans Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arising out of a separation agreement or divorce that you did not report as priority claims Doblogations arisin | | Yes | ■ Other. Specify Credit card purchases | |
| C/O Allied Business Services PO Box 1799 Holland, Mil 49422 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Dispute Type of NONPRIORITY unsecured claim: Debts to ension or profit-sharing plans, and other similar debts As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Debtor 1 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 the date you file, the claim is: Check all that apply Debtor 6 the debtors and another Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 the debtors and another Check if this claim is for a community debt Student loans Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 1 only Debtor 8 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 7 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 1 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 6 only Debtor 7 only Debtor 8 only Debtor 8 only Debtor 9 only Deb | 4.3 | | Last 4 digits of account number 5552 | \$97.00 |
| Holland, Mi 49422 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 and another Check if this claim is for a community debt Is the claim subject to offset? Other. Specify As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Unliquidated Student loans Debtor 1 and Debtor 2 only Student loans Debtor 1 shad Debtor 2 only Disputed Type of NoNPRIORITY unsecured claim: Student loans Debtor 1 onforce that you did not report as priority claims Debtor 1 onforce that you did not report as priority claims Debtor 2 only Debtor 3 priority claims Debtor 2 only Debtor 3 priority claims Debtor 4 priority claims Debtor 4 priority claims Debtor 5 priority claims Debtor 5 priority claims Debtor 6 priority claims Debtor 7 priority claims Debtor 9 priority claims Debtor 1 priority claims Debtor 1 priority clai | | c/o Allied Business Services | When was the debt incurred? | |
| Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only | | | | |
| Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt No Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Debtor 1 only Debtor 2 only Debtor 3 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 6 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 1 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 1 only Debtor 3 only Debtor 4 least one of the debtors and another Debtor 1 only Debtor 3 only Debtor 4 only Debtor 4 only Debtor 5 only Debtor 5 only Debtor 6 only Debtor 6 only Debtor 8 only Debtor 8 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 9 only Debtor 1 o | | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Debtor 2 only | | _ | | |
| Debtor 1 and Debtor 2 only | | Debtor 1 only | ☐ Contingent | |
| At least one of the debtors and another Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a separation agreement or divorce that you did not report as priority claims Obligations arising out of a se | | Debtor 2 only | ☐ Unliquidated | |
| Check if this claim is for a community debt Check if this claim is for a community debt Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims No Debts to pension or profit-sharing plans, and other similar debts Other. Specify medical | | ☐ Debtor 1 and Debtor 2 only | · | |
| debt sthe claim subject to offset? Obligations arising out of a separation agreement or divorce that you did not report as priority claims No | | ☐ At least one of the debtors and another | <u>·</u> | |
| Is the claim subject to offset? No | | | | |
| No | | | | |
| A4 Capital One Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts S6,937.81 | | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply Location is: Check all that apply As of the date you file, the claim is: Check all that apply Location is: Check all that apply As of the date you file, the claim is: Check all that apply Location is: Check a | | _ | Other. Specify medical | |
| Nonpriority Creditor's Name PO Box 6492 Carol Stream, IL 60197 Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No When was the debt incurred? As of the date you file, the claim is: Check all that apply Location is: Check all that apply As of the date you file, the claim is: Check all that apply Location is: Check all that apply As of the date you file, the claim is: Check all that apply Location is: Check a | 4.4 | Capital One | Last 4 digits of account number 3342 | \$6.937.81 |
| Number Street City State Zlp Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Debtor 1 and Debtors and another At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Debts do a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | | Nonpriority Creditor's Name | | Ψο,σοτίσι |
| Who incurred the debt? Check one. □ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| ■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt ls the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts | | | As of the date you file, the claim is: Check all that apply | |
| □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts | | _ | Continued. | |
| □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ No □ Debts to pension or profit-sharing plans, and other similar debts | | | | |
| □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Debts to pension or profit-sharing plans, and other similar debts | | _ | ` | |
| ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts | | • | • | |
| debt Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts Debts to pension or profit-sharing plans, and other similar debts | | | | |
| Is the claim subject to offset? ■ No □ Debts to pension or profit-sharing plans, and other similar debts | | • | <u> </u> | |
| | | Is the claim subject to offset? | report as priority claims | |
| ☐ Yes ☐ Other. Specify Credit card purchases | | ■ No | · · · · · · · · · · · · · · · · · · · | |
| | | Yes | ■ Other. Specify Credit card purchases | |

| Debtor | 1 Jacqueline Chartrant Gresehover | Case number (if known) | |
|--------|---|---|------------|
| 4.5 | Capital One | Last 4 digits of account number 5952 | \$551.02 |
| | Nonpriority Creditor's Name c/o Merchants & Medical | When was the debt incurred? | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | ■ Other. Specify Credit card purchases | |
| 4.6 | Capital One Bank | Last 4 digits of account number | \$3,245.00 |
| | Nonpriority Creditor's Name c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 | When was the debt incurred? | |
| | Norfolk, VA 23502 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | Debtor 1 only | Поло | |
| | | Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| | At least one of the debtors and another | Student loans | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □ Yes | ■ Other. Specify Credit card purchases | |
| 4.7 | Carsons | Last 4 digits of account number | \$571.00 |
| 4.1 | Nonpriority Creditor's Name PO Box 182789 | When was the debt incurred? | \$37 1.00 |
| | Columbus, OH 43218 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | | |
| | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other. Specify Credit card purchases | |
| | | | |

| Debtor | Jacqueline Chartrant Gresehover | Case number (if known) | |
|--------|---|---|------------|
| 4.8 | Chase Bank | Last 4 digits of account number 1538 | \$1,310.58 |
| | Nonpriority Creditor's Name c/o MRS 1930 Olney Ave. | When was the debt incurred? | |
| | Cherry Hill, NJ 08003 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | □ Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| | Yes | Other. Specify Credit card purchases | |
| 4.9 | Citibank | Last 4 digits of account number | \$1,018.00 |
| | Nonpriority Creditor's Name c/o Midland Funding 2365 Northside Drive, Ste 300 | When was the debt incurred? | |
| | San Diego, CA 92108 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| | Who incurred the debt? Check one. | The of the date you may the claim to. Officer all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | |
| | ☐ Yes | Other. Specify Credit card purchases | |
| 4.1 | Citibank | Last 4 digits of account number | \$907.00 |
| | Nonpriority Creditor's Name c/o Midland Funding 2365 Northside Dr., Ste 300 | When was the debt incurred? | |
| | San Diego, CA 92108 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | |
| | debt Is the claim subject to offset? | \square Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| | □Yes | ■ Other. Specify Credit card purchases | |

Official Form 106 E/F

| Jacqueline Chartrant Gresehover | Case number (if known) | |
|---|--|----------|
| Comenity Bank | Last 4 digits of account number 6046 | \$218.38 |
| Nonpriority Creditor's Name PO Box 182273 | When was the debt incurred? | |
| Columbus, OH 43218 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the damins. Oneok all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| ☐ Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit card purchases | |
| Comenity Bank | Last 4 digits of account number | \$571.0 |
| Nonpriority Creditor's Name | When was the debt incurred? | |
| c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 | when was the dept incurred? | |
| Norfolk, VA 23502 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | · · · · · · · · · · · · · · · · · · · | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ Yes | Other. Specify Credit card purchases | |
| | | |
| Comenity Bank Nonpriority Creditor's Name | Last 4 digits of account number | \$350.0 |
| c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 | When was the debt incurred? | |
| Norfolk, VA 23502 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | The state of the s | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| Check if this claim is for a community | Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| • | | |

Official Form 106 E/F

| Jacqueline Chartrant Gresehover | Case number (if known) | |
|--|--|----------------|
| Comenity Bank / Venus Credit | Last 4 digits of account number | \$350.00 |
| Nonpriority Creditor's Name PO Box 182789 | When was the debt incurred? | Ψοσοίος |
| Columbus, OH 43218 | As of the later of the deceleration of the dec | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | Debts to pension or profit-sharing plans, and other similar debts | |
| □Yes | ■ Other. Specify Credit card purchases | |
| FirsSource Advantage LLC | | |
| (American Exp) | Last 4 digits of account number 0996 | \$2,204.53 |
| Nonpriority Creditor's Name PO Box 628 | When was the debt incurred? | |
| Buffalo, NY 14240 | Then was the dest mounted. | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community debt | ☐ Student loans | |
| Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify Credit card purchases | |
| IOD | 0540 | Φ504.40 |
| JCP Nonpriority Creditor's Name | Last 4 digits of account number 8510 | \$524.40 |
| c/o Stillman Law Office | When was the debt incurred? | |
| 30057 Orchard Lake Rd., Ste 200 | | |
| Farmington Hills, MI 48334 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | As of the date you me, the claim is. Check all that apply | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | ☐ Obligations arising out of a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Credit card purchases | |

| | Kohls | Last 4 digits of account number 4259 | \$503.1 |
|---|---|---|---------|
| F | Nonpriority Creditor's Name PO Box 2983 Milwaukee, WI 53201 | When was the debt incurred? | |
| N | Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ı | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | ☐ Check if this claim is for a community | Student loans | |
| - | s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| I | No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| [| Yes | ■ Other. Specify Credit card purchases | |
| 1 | Sams Club / Synchrony Bank Nonpriority Creditor's Name | Last 4 digits of account number 5652 | \$632.6 |
| F | PO Box 530942 Atlanta, GA 30353 | When was the debt incurred? | |
| | Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| _ | Who incurred the debt? Check one. | | |
| | Debtor 1 only | Contingent | |
| _ | Debtor 2 only | Unliquidated | |
| _ | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| _ | At least one of the debtors and another | Student loans | |
| d | ☐ Check if this claim is for a community lebt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ı | No | Debts to pension or profit-sharing plans, and other similar debts | |
| [| ☐Yes | ■ Other. Specify Credit card purchases | |
| | Steinmart / Synchrony Bank | Last 4 digits of account number | \$471.0 |
| F | Nonpriority Creditor's Name PO Box 965005 | When was the debt incurred? | |
| N | Orlando, FL 32896 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| ı | Debtor 1 only | ☐ Contingent | |
| | Debtor 2 only | ☐ Unliquidated | |
| | Debtor 1 and Debtor 2 only | Disputed | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| | Check if this claim is for a community | ☐ Student loans | |
| | lebt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| г | □Yes | ■ Other. Specify Credit card purchases | |

| Jacqueline Chartrant Gresehover | Case number (if known) | |
|--|---|------------------|
| Synchrony Bank | Last 4 digits of account number | \$671.00 |
| Nonpriority Creditor's Name c/o Midland Funding LLC 2365 Northside Dr., Ste 300 San Diego, CA 92108 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Credit card purchases | |
| Synchrony Bank | Last 4 digits of account number | \$524.00 |
| Nonpriority Creditor's Name C/o Midland Funding LLC 2365 Northside Dr., Ste 300 | When was the debt incurred? | |
| San Diego, CA 92108 Jumber Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | Пол | |
| Debtor 2 only | Contingent | |
| <u>_</u> | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured claim: | |
| ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | |
| in Check if this claim is for a community debt steel subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other Specify Credit card purchases | |
| The Bank of Missouri | | \$759.00 |
| Nonpriority Creditor's Name | Last 4 digits of account number | φ <i>1</i> 39.00 |
| PO Box 4499 Beaverton, OR 97076 | When was the debt incurred? | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt s the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | lacksquare Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify Credit card purchases | |

Official Form 106 E/F

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Т | otal Claim |
|-----------------|-----|---|-----|---------|-------------------------|
| | 6a. | Domestic support obligations | 6a. | \$ | 0.00 |
| Total claims | | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | 6f. | Student loans | 6f. | Т \$ | otal Claim 47.667.00 |
| Total claims | | | | Ψ | 47,007.00 |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00 |
| | 6h. | Debts to pension or profit-sharing plans, and other similar debts | 6h. | \$ | 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ | 26,990.65 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ | 74,657.65 |

Official Form 106 E/F

| Fill in this infor | mation to identify your | case: | | |
|------------------------|--------------------------|--------------------|------------|--------------------------------------|
| Debtor 1 | Jacqueline Chart | rant Gresehover | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | EASTERN DISTRICT O | F MICHIGAN | |
| Case number (if known) | | | | ☐ Check if this is an amended filing |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Ronald Ulicni
341 Red Cedar Dr.
Oxford, MI 48371

State what the contract or lease is for
Residential Lease

| Fill in this in | formation to identify your | case: | | | |
|----------------------------------|---|--|------------------------|---|---|
| Debtor 1 | Jacqueline Chart | rant Gresehover | | | |
| 5 1 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States | Bankruptcy Court for the: | EASTERN DISTRICT O | F MICHIGAN | | |
| Case numbe (if known) | r | | | | ☐ Check if this is an amended filing |
| Official I | Form 106H | | | | |
| | le H: Your Cod | ebtors | | | 12/15 |
| ill it out, and our name ar | | boxes on the left. Attach . Answer every question | the Additional Page t | o this page. On the to | needed, copy the Additional Page, p of any Additional Pages, write |
| ■ No | | | | | |
| Arizona, No. G | n the last 8 years, have you California, Idaho, Louisiana, o to line 3. Did your spouse, former spou | Nevada, New Mexico, Pu | erto Rico, Texas, Wash | | ty states and territories include |
| in line 2 Form 10 out Colu | again as a codebtor only i 6D), Schedule E/F (Official ımn 2. | f that person is a guaran | tor or cosigner. Make | sure you have listed to 16G). Use Schedule D, | g with you. List the person shown he creditor on Schedule D (Official Schedule E/F, or Schedule G to fill |
| | olumn 1: Your codebtor ne, Number, Street, City, State and ZI | P Code | | Column 2: The cre Check all schedule | editor to whom you owe the debt es that apply: |
| 3.1 Na | me mber Street | | | ☐ Schedule D, lin☐ Schedule E/F,☐ Schedule G, lin☐ | line |
| City | | State | ZIP Code | | |
| 3.2 Na | me | | | □ Schedule D, lin □ Schedule E/F, □ Schedule G, lin | line |
| Nu | mber Street y | State | ZIP Code | | |

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| Fill | in this information to | o identify your ca | se: | | | | | | | |
|-----------------------|--|--------------------|--|---|---------------------------|------------------------------|-----------------------------|------------------------------|-----------------------------|-----------------|
| Deb | otor 1 | Jacqueline C | hartrant Gresehover | | | _ | | | | |
| | otor 2 use, if filing) | | | | | _ | | | | |
| Uni | ted States Bankrupt | tcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | | _ | | | | |
| | se number | | | | | | | | | chapter |
| Of | fficial Form | 106I | | | | | MM / DD/ Y | | ownig dato. | |
| | chedule I: ` | | ome | | | | IVIIVI / DD/ I | | | 12/15 |
| supį spoi attad | plying correct infouse. If you are sepond a separate sheet | rmation. If you a | ible. If two married peo are married and not filin spouse is not filing wi On the top of any addition | ig jointly, and you th you, do not inc | r spouse i lude inforn | s living with nation abou | h you, inclu ut your spo | ude informa ouse. If more | ition about e space is r | your needed, |
| 1. | Fill in your emplo | • • | | | | | | | | |
| | information. | , | | Debtor 1 | | | | or non-filir | ng spouse | |
| | If you have more t attach a separate information about | page with | Employment status* | ■ Employed□ Not employed | I | | ☐ Emplo | • | | |
| | employers. | | Occupation | Director of Cli | ent Relati | ions | | | | |
| | Include part-time, self-employed wor | | Employer's name | First Financia | l Group U | SA | | | | |
| | Occupation may in or homemaker, if i | | Employer's address | 100 W. Big Be Troy, MI 48084 | | Ste 200 | | | | |
| | | | How long employed th | | | for Addition | onal Emplo | yment Infor | mation | |
| Par | t 2: Give Det | ails About Mon | thly Income | | | | | | | |
| | mate monthly inco | | te you file this form. If y | ou have nothing to | report for a | any line, wri | te \$0 in the | space. Inclu | ıde your non | n-filing |
| | u or your non-filing : e space, attach a se | | re than one employer, co his form. | mbine the informat | ion for all e | mployers fo | r that perso | n on the line | es below. If y | ou need |
| | | | | | | For De | ebtor 1 | For Debt | | |
| 2. | | | y, and commissions (be alculate what the monthly | | 2. | \$ | 3,356.69 | \$ | N/A | |
| 3. | Estimate and list | monthly overti | me pay. | | 3. | +\$ | 0.00 | +\$ | N/A | |
| 4. | Calculate gross I | Income. Add lin | e 2 + line 3. | | 4. | \$\$ | 356.69 | \$ | N/A | |

| | | | | For | Debtor 1 | | Debtor 2 or -filing spouse | |
|-----|-----------------|---|-----------|-----|---------------|------|-------------------------------|----------------|
| | Сору | line 4 here | 4. | \$ | 3,356.69 | \$ | N/A | |
| 5. | List a | ıll payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 37.07 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | 0.00 | \$ | N/A | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | 0.00 | \$ | N/A | <u>-</u> |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | \$ | N/A | • |
| | 5e. | Insurance | 5e. | \$ | 0.00 | \$ | N/A | • |
| | 5f. | Domestic support obligations | 5f. | \$ | 0.00 | \$ | N/A | - ' |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$ | 0.00 | + \$ | N/A | - |
| 6. | Add t | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 37.07 | \$ | N/A | - |
| 7. | Calcu | ulate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 3,319.62 | \$ | N/A | |
| 8. | | Net income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. | Interest and dividends | 8b. | \$ | 0.00 | \$ | N/A | • |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | N/A | - |
| | 8d. | Unemployment compensation | 8d. | \$ | 0.00 | \$ | N/A | • |
| | 8e. | Social Security | 8e. | \$ | 0.00 | \$ | N/A | - |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f. | \$ | 0.00 | \$ | N/A | - |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | - |
| 9. | Add a | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | \ |
| 10. | Calcu | ulate monthly income. Add line 7 + line 9. | 10. \$ | 3 | 3,319.62 + \$ | | N/A = \$ | 3,319.62 |
| | | he entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | - | | | 0,010102 |
| | State Includ | all other regular contributions to the expenses that you list in <i>Schedule</i> de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not | depen | • | | | Schedule J. 11. +\$ | 0.00 |
| | Add t | the amount in the last column of line 10 to the amount in line 11. The res | | | | | | |
| | | that amount on the Summary of Schedules and Statistical Summary of Certaines | пт старі | | | | 12. \$ | 3,319.62 |
| | Write | , , , , , , , , , , , , , , , , , , , | III LIADI | | | | Combin | ned |
| 13. | Write applie | , , , , , , , , , , , , , , , , , , , | | | | | Combin | · · |

Official Form B 6I Attachment for Additional Employment Information

| Debtor | | |
|---------------------|-----------------------------------|--|
| Occupation | caregiver | |
| Name of Employer | Absolute Staffing Health Services | |
| How long employed | 1 year | |
| Address of Employer | | |

| E-11 | | (**** | | | | | | |
|------------|-------------------------------|---|-------------------------|---|--|-------------|--------------------------------------|-------------------------------|
| Fill | in this informa | tion to identify yo | our case: | | | | | |
| Deb | tor 1 | Jacqueline C | hartrant | Gresehover | | | eck if this is: | |
| Deb | tor 2 | | | | | | An amended filing A supplement show | wing postpetition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | |
| Unit | ed States Bankr | ruptcy Court for the: | EASTE | RN DISTRICT OF MICHIG | iAN | | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| | fficial Fo | rm 106J | | | | | | |
| | | | | | | | | |
| | | J: Your I | | | | | | 12/15 |
| info | ormation. If m | | eded, atta | If two married people ar ch another sheet to this n. | | | | |
| Par | t 1: Descr | ibe Your House | hold | | | | | |
| 1. | Is this a joir | nt case? | | | | | | |
| | ■ No. Go to □ Yes. Doe | o line 2. es Debtor 2 live i | n a separa | ate household? | | | | |
| | □N | 0 | | | | | | |
| | □ Y | es. Debtor 2 mus | t file Offici | al Form 106J-2, <i>Expenses</i> | for Separate House | hold of Del | btor 2. | |
| 2. | Do you have | e dependents? | ■ No | | | | | |
| | Do not list Do Debtor 2. | ebtor 1 and | ☐ Yes. | Fill out this information for each dependent | Dependent's relati Debtor 1 or Debtor | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | | | | Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | - | | | ☐ Yes |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses of | enses include f people other th d your depender | han $_{f \Box}$ | No Yes | | | | |
| Est exp | t 2: Estim | ate Your Ongoin | ng Monthl our bankru | y Expenses iptcy filing date unless y y is filed. If this is a supp | | | | |
| the | | n assistance and | | government assistance i luded it on <i>Schedule I:</i> Y | | | Your exp | enses |
| • | | , | | | | | | |
| 4. | | or home owners and any rent for the | | ses for your residence. In r lot. | nclude first mortgage | 4. | \$ | 1,100.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | | | | 4b. | : | 125.00 |
| | | maintenance, re | | | | 4c. | | 0.00 |
| 5. | | owner's associati nortgage payme | | ominium dues our residence, such as ho | me equity loans | 4d. 5. | \$ \$ | 0.00 |

Official Form 106J

Official Form 106J Schedule J: Your Expenses

| Debtor 1 | Jacqueline Chart | rant Gresenover | | |
|---|---|--|---|--|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | First Name | Middle Norse | Lank | |
| Spouse if, filing) | FIRST Name | Middle Name | Last Name | |
| nited States Ba | ankruptcy Court for the: | EASTERN DISTRICT | OF MICHIGAN | |
| ase number | | | | |
| known) | | | | ☐ Check if this is an amended filing |
| two married pe | eople are filing togethe | r, both are equally respo | Debtor's Schedu onsible for supplying correct inform | ation. |
| two married po ou must file thi otaining mone | eople are filing togethe | r, both are equally responder. Ile bankruptcy schedule on connection with a ban | onsible for supplying correct informs | nation. |
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| bu must file this staining money ars, or both. 1 Significant of the staining money are seen to be | eople are filing togethe is form whenever you fi y or property by fraud ii 8 U.S.C. §§ 152, 1341, 1 in Below Name of person | r, both are equally response. Ile bankruptcy schedule in connection with a band 519, and 3571. The one who is NOT an attomate that I have read the sun | onsible for supplying correct informs or amended schedules. Making a kruptcy case can result in fines up | false statement, concealing property, or to \$250,000, or imprisonment for up to 20 forms? Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) |
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Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

| Fill | in this inforn | nation to identify you | r case: | | | | |
|---|--|----------------------------------|--|---|---|---|--|
| | | | | | | | |
| Den | otor 1 | First Name | trant Gresehover Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | | First Name | Middle Name | Loot Name | | | |
| | | | | Last Name | | | |
| Unit | ed States Ba | nkruptcy Court for the: | EASTERN DISTRICT OF | MICHIGAN | | | |
| Case number(if known) | | | | | _ | ☐ Check if this is an amended filing | |
| Sta Be a infor | s complete a | of Financial | attach a separate sheet to | re filing together, both are | ankruptcy equally responsible for sup additional pages, write you | | |
| Par | Give D | Details About Your Ma | rital Status and Where You | Lived Before | | | |
| 1. | What is your current marital status? | | | | | | |
| | ☐ Married | | | | | | |
| | ■ Not married | | | | | | |
| 2. | Ouring the last 3 years, have you lived anywhere other than where you live now? | | | | | | |
| | ■ No□ Yes. List all of the places you lived in the last 3 years. Do not include where you live now. | | | | | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor 1 lived there | Debtor 2 Prior Ad | dress: | Dates Debtor 2 lived there | |
| | | | | | ity property state or territory | | |
| | ■ No □ Yes. Ma | ake sure you fill out <i>Scl</i> | nedule H: Your Codebtors (Of | ficial Form 106H). | | | |
| Par | Explai | n the Sources of You | r Income | | | | |
| 4. | Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | |
| | □ No | | | | | | |
| | Yes. Fill | in the details. | | | | | |
| | | | Debtor 1 | | Debtor 2 | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |
| From January 1 of current year until the date you filed for bankruptcy: | | | ■ Wages, commissions, bonuses, tips | \$19,310.75 | ☐ Wages, commissions, bonuses, tips | | |
| | | | Operating a business | | ☐ Operating a business | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Creditor's Name and Address

Dates of payment

attorney for this bankruptcy case.

Total amount paid

include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

Amount you still owe

Was this payment for ...

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 2

Case number (if known)

Official Form 107

Debtor 1

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 3

| 17. | | | | | | |
|---|--|--|-----------------------------|----------------|---|---|
| | Person Who Was Paid Address | Description and va transferred | alue of any prop | perty | Date payment or transfer was made | Amount of payment |
| 18. | Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | |
| | Person Who Received Transfer Address Person's relationship to you | Description and va property transferr | | | any property or received or debts schange | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | |
| | Name of trust | Description and va | alue of the prop | erty transferi | red | Date Transfer was made |
| | Within 1 year before you filed for bankruptcy, v sold, moved, or transferred? Include checking, savings, money market, or o | lithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, clold, moved, or transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokouses, pension funds, cooperatives, associations, and other financial institutions. | | | | |
| | | ast 4 digits of ccount number | Type of accou instrument | cle | ate account was osed, sold, oved, or ansferred | Last balance before closing or transfer |
| Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securit cash, or other valuables? No Yes, Fill in the details. | | | tory for securities, | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had according Address (Number, State and ZIP Code) | | Describe the | contents | Do you still have it? |
| 22. | Have you stored property in a storage unit or p No Yes. Fill in the details. | place other than your | home within 1 | year before y | ou filed for bankruptc | y? |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, St State and ZIP Code) | | Describe the | contents | Do you still have it? |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 6

☐ An owner of at least 5% of the voting or equity securities of a corporation

| Det | otor 1 Jacqueline Chartrant Gresehove | r Cas | se number (if known) | | |
|------------|---|---|---|--|--|
| | <u> </u> | | | | |
| | No. None of the above applies. Go to Part 12. | | | | |
| | lacksquare Yes. Check all that apply above and fill | in the details below for each business. | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. | | |
| | (| Name of accountant of bookkeeper | Dates business existed | | |
| 28. | Within 2 years before you filed for bankrupt institutions, creditors, or other parties. No | cy, did you give a financial statement to an | nyone about your business? Include all financial | | |
| | Yes. Fill in the details below. | | | | |
| | Name Address (Number, Street, City, State and ZIP Code) | Date Issued | | | |
| Par | t 12: Sign Below | | | | |
| are twith | | false statement, concealing property, or ol | declare under penalty of perjury that the answers btaining money or property by fraud in connection irs, or both. | | |
| Jac | queline Chartrant Gresehover nature of Debtor 1 | Signature of Debtor 2 | | | |
| Dat | December 12, 2018 | Date | | | |
| Did ■ N | | ent of Financial Affairs for Individuals Filing | g for Bankruptcy (Official Form 107)? | | |
| ■ N | you pay or agree to pay someone who is not o someone who is not o someone. Name of Person Attach the Bankru | | | | |

United States Bankruptcy Court Eastern District of Michigan

| In re | Jacqueline Chartrant Gresehover | | Case No. | | |
|---------|--|--------------------------------------|--|-----|--|
| | | Debtor(s) | Chapter 7 | | |
| | | MENT OF ATTORNEY FOR D | | | |
| | | RSUANT TO F.R.BANKR.P. 20 | <u>D16(b)</u> | | |
| | The undersigned, pursuant to F.R.Bankr.P. 201 | | | | |
| 1. | The undersigned is the attorney for the Debtor(| | | | |
| 2. | The compensation paid or agreed to be paid by | the Debtor(s) to the undersigned | is: [Check one] | | |
| | [X] <u>FLAT FEE</u>A. For legal services rendered in content | unlation of and in connection with | h this assa | | |
| | exclusive of the filing fee paid | | | | |
| | B. Prior to filing this statement, receive | ed | | | |
| | C. The unpaid balance due and payable | | | | |
| | [] RETAINER | | | | |
| | A. Amount of retainer received | | ······ | | |
| | B. The undersigned shall bill against th agreed to pay all Court approved fee | | [Or attach firm hourly rate schedule.] Debtor(s) has ount of the retainer. | ave | |
| 3. | \$ of the filing fee has been paid. | | | | |
| 4. | In return for the above-disclosed fee, I have ag that do not apply.] | reed to render legal service for all | aspects of the bankruptcy case, including: [Cross out a | iny | |
| | | ation, and rendering advice to the | debtor in determining whether to file a petition in | | |
| | bankruptcy; B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; | | | | |
| | C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; | | | | |
| | D. Representation of the debtor in adversary proceedings and other contested bankruptey matters; E. Reaffirmations; | | | | |
| | F. Redemptions; | | | | |
| | G. Other: | litare to raduoe to market val | ue; exemption planning; preparation and filing | o f | |
| | | pplications as needed; prepa | aration and filing of motions pursuant to 11 US | | |
| 5. | By agreement with the debtor(s), the above-dis Representation of the debtors i actions or any other adversary | n any dischargeability action | llowing services: ns, judicial lien avoidances, relief from stay | | |
| 6. | | s, wages, compensation for service | es performed | | |
| | | cluding the identity of payor) | | | |
| 7. | The undersigned has not shared or agreed to sh corporation, any compensation paid or to be pa | | than with members of the undersigned's law firm or | | |
| Dated: | December 12, 2018 | | /s/ Stephanie Krane-Boehmer | | |
| | | | Attorney for the Debtor(s) Stephanie Krane-Boehmer P70737 Law Office of Stephanie Krane-Boehmer, PLLC 2947 S. Adams Rd. Rochester Hills, MI 48309 248-293-0048 s_krane@hotmail.com | ; | |
| Agreed: | /s/ Jacqueline Chartrant Gresehover | | | | |
| - | Jacqueline Chartrant Gresehover | | D. L. | | |
| | Debtor | | Debtor | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|---------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| <u>+</u> \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans.

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Eastern District of Michigan

| In re Jacqueline Chartrant Gresehov | /er | Case No. |
|---|---|---|
| | Debtor(s) | Chapter 7 |
| VERI | IFICATION OF CREDITOR | R MATRIX |
| ne above-named Debtor hereby verifies t | that the attached list of creditors is true and | I correct to the best of his/her knowledge. |
| Date: December 12, 2018 | /s/ Jacqueline Chartrant Gre | - |
| | | IOACI |

Ally Financial c/o Radius Global Solutions LLC 9550 Regency Square Blvd, Ste 500A Jacksonville, FL 32225

Bankcard Services PO Box 84059 Columbus, GA 31908

Beaumont Health c/o Allied Business Services PO Box 1799 Holland, MI 49422

Capital One PO Box 6492 Carol Stream, IL 60197

Capital One c/o Merchants & Medical

Capital One Bank c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 Norfolk, VA 23502

Carsons PO Box 182789 Columbus, OH 43218

Chase Bank c/o MRS 1930 Olney Ave. Cherry Hill, NJ 08003

Citibank c/o Midland Funding 2365 Northside Drive, Ste 300 San Diego, CA 92108

Citibank c/o Midland Funding 2365 Northside Dr., Ste 300 San Diego, CA 92108 Comenity Bank PO Box 182273 Columbus, OH 43218

Comenity Bank c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 Norfolk, VA 23502

Comenity Bank c/o Portfolio Recovery 120 Corporate Blvd, Ste 100 Norfolk, VA 23502

Comenity Bank / Venus Credit PO Box 182789 Columbus, OH 43218

FirsSource Advantage LLC (American Exp) PO Box 628 Buffalo, NY 14240

JCP c/o Stillman Law Office 30057 Orchard Lake Rd., Ste 200 Farmington Hills, MI 48334

Kohls PO Box 2983 Milwaukee, WI 53201

Portfolio Recovery Associates LLC 120 Corporate Blvd, Ste 100 Norfolk, VA 23502

Ronald Ulicni 341 Red Cedar Dr. Oxford, MI 48371

Sams Club / Synchrony Bank PO Box 530942 Atlanta, GA 30353 Steinmart / Synchrony Bank PO Box 965005 Orlando, FL 32896

Synchrony Bank c/o Midland Funding LLC 2365 Northside Dr., Ste 300 San Diego, CA 92108

Synchrony Bank c/o Midland Funding LLC 2365 Northside Dr., Ste 300 San Diego, CA 92108

The Bank of Missouri PO Box 4499 Beaverton, OR 97076

US Dept of Education 2401 International PO Box 7859 Madison, WI 53704